

STATE OF ILLINOIS  
LAKE COUNTY  
FILED FOR RECORD

2005 000649

2005 JUL 22 PM 2:28

MICHAEL A. BROWN  
RECORDER

**INFORMATION REQUEST**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT (optional) CAROLYN CONWAY (703) 760-8696	FILING OFFICE ACCT #
B. RETURN TO: (Name and Address)  REILLY MORTGAGE GROUP, INC. 2010 CORPORATE RIDGE SUITE 1000 MCLEAN, VA 22102	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR NAME to be searched - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

1a. ORGANIZATION'S NAME HARBORSIDE HOUSING LIMITED PARTNERSHIP				
OR	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

**2. INFORMATION OPTIONS** relating to UCC filings and other notices on file in the filing office that include as a Debtor name the name identified in item 1:

2a. SEARCH RESPONSE  CERTIFIED (Optional)  
 Select one of the following two options:  ALL (Check this box to request a response that is complete, including filings that have lapsed.)  UNLAPSED

2b. COPY REQUEST  CERTIFIED (Optional)  
 Select one of the following two options:  ALL  UNLAPSED

2c. SPECIFIED COPIES ONLY  CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)
2003000786	7/25/03	FSO - FINANCING STATEMENT ORIGINAL

**3. ADDITIONAL SERVICES:**

PROJECT NAME: HARBORSIDE APARTMENTS

**4. DELIVERY INSTRUCTIONS** (request will be completed and mailed to the address shown in item B unless otherwise instructed here):

4a.  Pick Up  
 4b.  Other **PLEASE UTILIZED THE ENCLOSED S.A.S.E. FOR THE RESULTS OF THIS SEARCH.**

Specify desired method here (if available from this office); provide delivery information (e.g., delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)

FILING OFFICE COPY (1) — NATIONAL INFORMATION REQUEST (FORM UCC11) (REV. 05/09/01)